

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.
09/465,429
APPLICANT(S)

FILED DATE

CLAIMS

3-31-04

| | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | |
|--------------|---------------------|-----|---------------------|-----|
| | IND | DEP | IND | DEP |
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| TOTAL IND. | | | | |
| TOTAL DEP. | | | | |
| TOTAL CLAIMS | | | | |

3-31-04

| | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | |
|--------------|---------------------|-----|---------------------|-----|
| | IND | DEP | IND | DEP |
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| 100 | | | | |
| TOTAL IND. | 2 | 1 | 1 | 1 |
| TOTAL DEP. | 9 | 4 | 5 | |
| TOTAL CLAIMS | 11 | 5 | | |